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ABSTRACT

The goals, grantmaking strategies, and interests of the Mott Foundation with regard to identifying problems and developing programs for adolescent women are reviewed in a brief introduction. Four articles address various aspects of the problem of teenage pregnancy. The title article provides a review of recent statistics on a decline in the teen birthrate, pointing out that there is still an enormous problem of teen pregnancies. Of special concern is the continuing increase in the number of babies born outside marriage to teen mothers. No single approach will reduce pregnancy rates among all groups of teenagers. The influence of several distinct and complex issues is summarized. Two articles, "The Carrera Model: A Program for Youth 'At Promise,' Not 'At Risk'" and "Training and Evaluating Keys to Future for Carrera Model," highlight a holistic, adolescent pregnancy prevention initiative of the New York City-based Children's Aid Society, a long-term comprehensive program for adolescents with many deficits in their lives. Replications of the program are reported. The final article, "Innovative Programs Address Sociocultural Barriers," examines Mott-supported projects that deal with other aspects of the teen pregnancy issue. (EMK)

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Teenage Pregnancy

A Continuing Problem Defies Easy Solution

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Introduction

The Mott Foundation has been at the forefront in identifying problems and developing programs for adolescent women. Its first grant in support of such a program was made in 1938 to the Flint (Mich.) Board of Education.

During the 1970s, as the issue became a growing national concern, the Foundation made its first teenage pregnancy grants outside Flint, funding projects that sought to reduce pregnancies and births to unwed teenagers in low-income communities. Since 1976, Mott has invested $9.6 million in the area of adolescent pregnancy while recognizing that the issue is a difficult one, involving many differing personal values and beliefs.

To this end, it has worked to identify and promote successful primary prevention policies and practices through research, pregnancy prevention models and other programs.

The Foundation has concentrated on making grants to national organizations that address federal and state policy advocacy, information gathering, and dissemination and networking efforts.

Today, this grantmaking falls within the Strengthening Families program area of Mott's Poverty program. Its goals are to delay sexual activity among adolescents, provide information and access to contraceptives for those teens who are sexually active to prevent both pregnancy and sexually transmitted diseases, and ensure equal access to information and resources to prevent unintended births to teens.

To advance these goals, there are three grantmaking strategies, all geared to low-income communities:

- support research and evaluation that identify promising approaches and help establish outcomes and impacts of existing approaches that reduce first births to teens;
- support pilot demonstrations of promising community and school-based approaches for delaying sexual activity, preventing pregnancy and/or reducing first births to teens; and
- support efforts to spread to local communities, educators and decisionmakers information about successful approaches to delaying sexual activity, preventing pregnancies and preventing first births to teens.

The Mott Foundation is particularly interested in holistic, community-based prevention efforts and those that are more attentive to both cultural and developmental issues affecting adolescents.

This issue of the *Mott Exchange* looks at the scope of the problem and some of the programs the Foundation is supporting. The articles were written by Sheila Beachum-Bilby, a Lansing, Michigan-based free-lance writer.

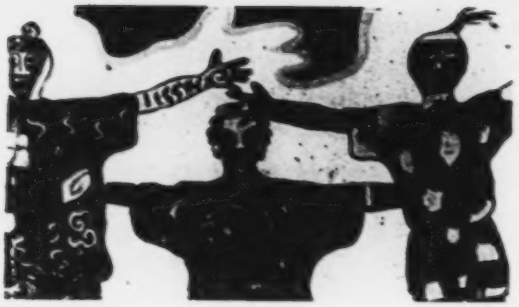

TABLE OF CONTENTS

2

Teen Pregnancy:
A Continuing Problem
Defies Easy Solution

10

The Carrera Model:
A Program for Youth 'At Promise,'
Not 'At Risk'

18

Training and Evaluating Keys
to Future for Carrera Model

20

Innovative Programs Address
Sociocultural Barriers

25

PEOPLE OF NOTE

26

GRANTS OF NOTE

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Two

BY SHEILA BEACHUM-BILBY

Recent banner headlines have heralded a drop in the teenage pregnancy rate in the United States. And yet, hidden behind those headlines is the fact that this is still a critical problem that defies easy definition, let alone easy solutions.

Some statistics from the Alan Guttmacher Institute and Child Trends Inc. help reveal the continuing problem:

- Every day in the United States, more than 2,700 teenagers get pregnant — a number that makes the U.S. rate twice that of any other industrialized nation.
- In 1996, 506,000 babies were born to females under 20, compared with a high of 656,000 in 1970 and the most recent low of 472,000 in 1986.
- The birthrate to teens aged 15 to 19 was 54.7 per 1,000 in 1996, down 12 percent from 62.1 per 1,000 in 1991. The preliminary 1996 data marked the fifth consecutive year of decline, but it was still above the rate of 50.2 per 1,000 in the mid-1980s.
- Among the pregnant teens who had their babies in 1994, 76 percent occurred outside marriage, a number that has climbed steadily since 1960, when it was 15 percent.
- More teenagers today are having sex. In 1970, about a fourth of all teens aged 15 to 19 were sexually active. In 1988, 50 percent of females and 60 percent of males in that age category had had sexual intercourse.
- More teens are using contraceptives, but a third don't use any method of protection in their first experience with sexual intercourse. And almost two-thirds wait up to a year after first intercourse before seeking out medical contraceptive services.
- Most of the increase in female sexual activity in the 1980s was among white teenagers and those in higher-income families, narrowing the previous racial, ethnic and income differences.
- The government spent more than $25 billion in 1990 for social, health and welfare services to families begun by teenage mothers.

Sharon Lovick Edwards, president of the Cornerstone Consulting Group Inc. in Houston, defines teen pregnancy as a problem comprising a number of distinct issues that have emerged over the past 30 years with changes in sexual behavior, family formation and reproduction.

The birthrate to teens aged 15 to 19 was 54.7 per 1,000 in 1996, down 12 percent from 62.1 per 1,000 in 1991. The preliminary 1996 data marked the fifth consecutive year of decline.

Based on her review of literature and more than two decades of work in the field, she identifies those issues as "early sexual activity, delayed family formation, increased out-of-wedlock childbearing, limited contraceptive options, the complexity of contraceptive use, insufficient family planning services, and cultural reticence around issues of sexuality and contraception."

Given the complexity of these contributing factors, there are various approaches to reducing teen pregnancy. There are school-based sex education classes; abstinence-only programs; family planning services and clinics for sexually active teens; comprehensive prevention programs that focus on education, jobs, counseling and sexuality education; and youth development programs.

Experts recognize that no single approach will reduce pregnancy rates among all groups of teenagers.

"There is no one approach because every community, every neighborhood, every group of people across this country is very different," said Barbara Sugland, a project director with Child Trends Inc. in Washington, D.C.

But it is at the local and state levels that prevention programs get carried out. Ultimately, therefore, each community has to decide how best to tackle its teen pregnancy problem.

Today, there are pockets of promise among the hundreds of community- and school-based teen pregnancy prevention programs that have been initiated over the past two decades across the nation. And evaluations of some of these programs show that they can make a significant difference in the lives of the young people they serve.

In the 1970s and 1980s, policymakers and experts who worked with adolescents calculated that if teenagers were given good sex education programs, the problem of teen pregnancy would be fixed.

"We're always looking for the magic bullet," said Barbara Kemp Huberman, director of training and sexuality education for Advocates for Youth in Washington, D.C.

"But where we failed as a country and designers of policy was that we did not supply the resources for communities to provide what was needed for these young teen mothers to not get pregnant again or not drop out of school or get on with their lives."

Today, the issue is aggravated further by the fear of AIDS, the earlier onset of physical maturation in young women, the rise in both the average age of economic viability and the age of marriage, the rising number of unwed teen mothers, and the decrease in the social safety net.

Many of these factors would lead some to place a stronger emphasis on the need for young people to understand how to protect themselves from pregnancy and disease. However, many experts in the teenage pregnancy prevention field were stunned when lawmakers in 1996 enacted federal welfare reform legislation that — among its many provisions — encourages abstinence-only programs. Some $50 million was earmarked to pay for those programs in the states, starting Oct. 1, 1997. With matching funds from the states, $88 million in public money will be spent annually for abstinence-only programs.

Politically, it's difficult to be against abstinence. But the concern is there is not enough evidence to support claims that abstinence-only programs deter sexual activity among young people.

Indeed, a review commissioned by a task force of the National Campaign to Prevent Teen Pregnancy, a nonprofit, nonpartisan initiative launched at the urging of President Clinton in the spring of 1996, reached much the same conclusion.

"Thus far, no abstinence-only education program has [yet] been found to delay the onset of intercourse, but very few such programs have been well-evaluated and, thus, there is little evidence to determine whether or not abstinence-only programs can delay intercourse," said California sociologist Douglas Kirby in the task force report titled, *No Easy Answers*.

As the debate on welfare reform unfolded, the image of teen mothers living on monthly welfare checks proved irresistible for lawmakers intent on reducing the welfare rolls.

"Congress in its wisdom decided to address welfare... as we know it and, unfortunately, took out after teen parents, who are a very, very small part in what we used to have to pay out in terms of welfare," Kemp Huberman said.

However, statistics do affirm that 54 percent of women who had their first child at age 16 or younger received federal welfare within five years, compared with 11 percent of women who have their first child at age 22-24.

"There is no one approach because every community, every neighborhood, every group of people across this country is very different."

Barbara Sugland

"The truth of the matter is if you look at the statistics, there were actually more pregnant teens in the '50s and '60s than there are now," said Lynda Bell, national coordinator for the Cornerstone Consulting Group Inc.'s replication efforts of the Teen Outreach Program. "What's driving this [welfare reform] is there are now more unwed teens than there have ever been."

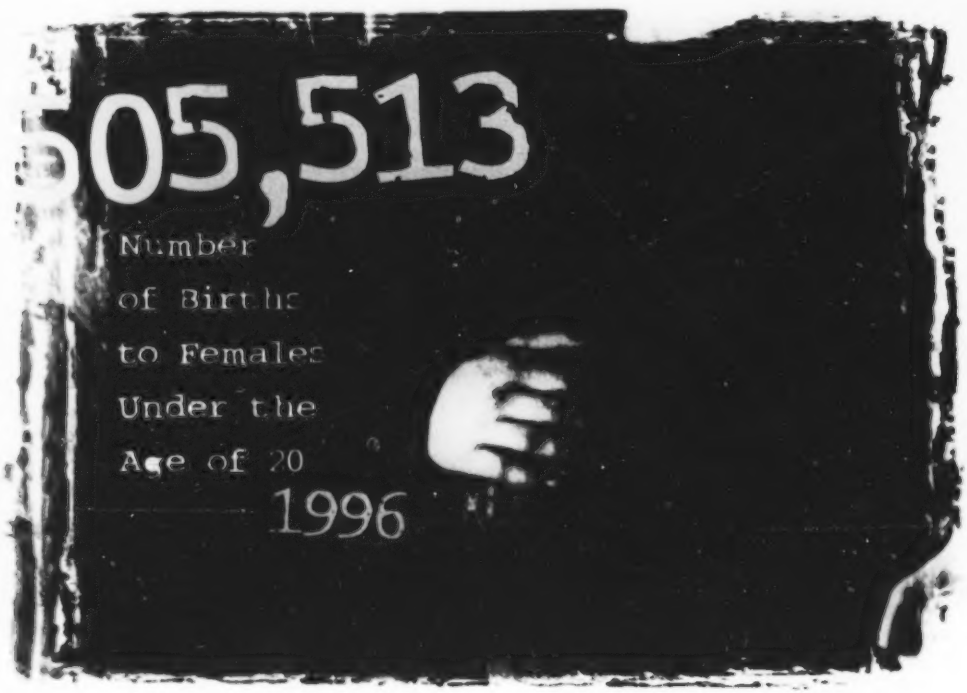
Out-of-wedlock births for women aged 15 to 24 from 1985 through 1989 show that 81 percent of all first births to women aged 15 to 17 occurred outside marriage. The figures dip to 59 percent for women 18 to 19 and 27 percent for women 20 to 24, according to a Mott Foundation-supported report entitled *Sex and America's Teenagers* by the Alan Guttmacher Institute.

Research has found that while teen pregnancy does not cause poverty, it may perpetuate it. In fact, existing poverty, alcohol and drug abuse, disrupted families, and violence are the breeding ground for young people who are at greater risk for early sexual activity and too-early parenting.

Several research studies initiated by the Robin Hood Foundation found that children of adolescent parents face substantial disadvantages. Compared with children whose mothers were 20-21 when they were born, children who were born to women 17 or younger tend to have more difficulty in school, poorer health with less health care, less stimulating and supportive home environments, higher rates of incarceration, and higher rates of adolescent childbearing.

And teen mothers are at greater risk of socioeconomic disadvantage throughout their lives than those who delay childbearing until their 20s. These mothers generally are less educated, have more children and higher levels of nonmarital births.

Thus, teenage pregnancy and parenting frequently are symptoms of living in poverty. And because life options often are further reduced for impoverished teen parents, efforts aimed at reducing teen pregnancy are critical to reducing persistent poverty.



"The truth of the matter is if you look at the statistics, there were actually more pregnant teens in the '50s and '60s than there are now. What's driving this is there are now more unwed teens than there have ever been."

Lynda Bell

If progress is to continue in the adolescent reproductive health arena on the one front that has seen improvement — a rise in contraceptive use — experts say making contraceptive methods available to adolescents will require political will, community acceptance and funding.

"Among sexually active kids, condom use is rising. Kids are getting the message and are practicing safer sex," Kemp Huberman said.

However, experts say no federal money ever has been earmarked for comprehensive teenage pregnancy prevention programs. Those usually are funded privately by foundations. Some federal grants were given in the late 1970s and 1980s for demonstration projects, which focused on abstinence and adoption.

At the same time, however, there has been a steady erosion of federal dollars funneled over the past 20 years to family planning services and clinics, which adolescents are most likely to use.

Comprehensive teen pregnancy prevention programs recognize that it is individuals who must make the decision to protect themselves against the risk of pregnancy or sexually transmitted diseases. These programs don't encourage adolescents to have sex but, if the adolescents do, they increase the likelihood that they will use contraceptives.

Experts generally agree that three key areas affect teen pregnancies — a knowledge base to make responsible decisions, access to contraceptive methods, and motivation for either not engaging in sex or using contraceptives if involved sexually.

"We know how to prevent teen pregnancy if people sexually active would use contraceptives," Lovick Edwards said. "This is a technology we don't actively promote. We try to shield it from young people."

And many teens won't get much help from their parents, who experts say still feel awkward talking to their children about sexuality.

"Part of it is parents not having the skills and accurate information to be able to have a conversation," said Lovick Edwards, who adds that parents often parent the way they were parented.

"The other thing is parents don't want their kids to be hurt. Having sex and sexuality is really at its core about relationships and feelings and caring, and it puts people in very vulnerable positions."

For these reasons and more, the issue of teen pregnancy and its deleterious impact on the fabric of society will not disappear from our nation's political radar screen in the foreseeable future. Experts agree there remains much work to be done.

"I think we're actually in a period of retrenchment," Lovick Edwards said. "I think part of it is that when people feel overwhelmed, they retreat to a path that seems more manageable."

She fears that the movement to promote teen pregnancy prevention may be losing ground in the current political environment and harm may be done if young people aren't given the information they need.

"This is no longer a problem where we're worried about changing life trajectory," Lovick Edwards said. "We're talking about young people who are at risk for death."

Today, much is known about what components are successful in teen pregnancy prevention initiatives.

One of the leading groups for spreading the word about such successes is Advocates for Youth, which maintains a clearinghouse of model programs, evaluations and best practices nationwide. It also is active in training to help people in the field develop as competent practitioners and then become advocates in their communities.

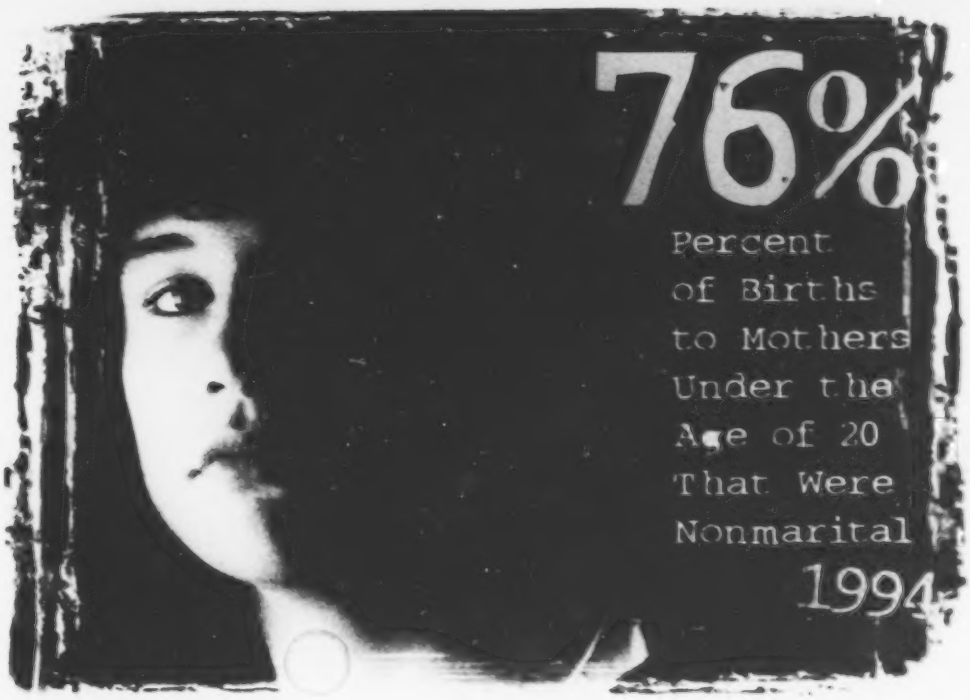
Advocates for Youth has a Teen Pregnancy Prevention Initiative that provides resources, including a how-to manual for building strong pregnancy prevention coalitions, "teen pregnancy month" campaign materials, and information on how to promote improved parent-child communications. It also helps with ongoing training and technical assistance to states and localities implementing teen pregnancy prevention strategies. It has received a three-year, $375,000 grant from the Mott Foundation.

As noted earlier, researchers conclude from a number of studies that while reducing the rate of teen pregnancy is challenging, it is possible.

One of the successful initiatives has been the Teen Outreach Program (TOP), a youth development program that links volunteer community service with the promotion of school continuation and pregnancy prevention.

The TOP approach to teen pregnancy prevention, which has been well-evaluated for more than a decade with support from the Mott Foundation, was first developed in the late 1970s by the Association of Junior Leagues International. It provides mostly school-based, peer support to high school girls and boys considered most likely to become teen parents and/or school dropouts. Teens participating in TOP must do some volunteer community service work, which helps build self-esteem and teaches basic pre-employment skills.

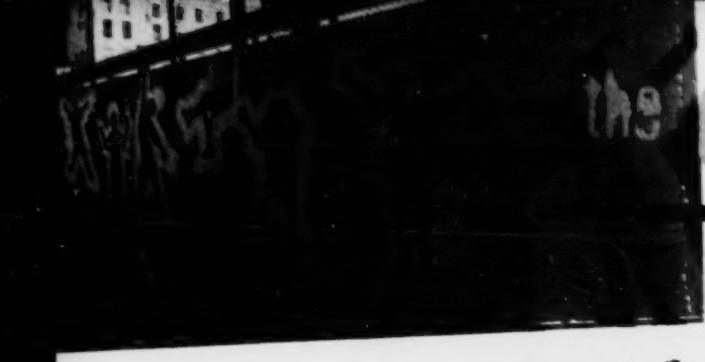
A study published in August 1997 in the journal 'Child Development' concluded that teen girls are less likely to become pregnant if they are involved in community service projects. It found a pregnancy rate of 4.2 percent among 283 girls.



A study published in August 1997 in the journal *Child Development* concluded that teen girls are less likely to become pregnant if they are involved in community service projects. It found a pregnancy rate of 4.2 percent among 283 girls who participated in TOP throughout high school.

With the help of a $277,920 grant from the Mott Foundation, the Cornerstone Consulting Group has focused on developing materials and technical assistance to increase national visibility and allow replication of TOP in local communities. There are now 30 communities nationwide using TOP at about 120 sites. About 6,000 adolescents have been exposed to TOP, with a goal of reaching up to 12,000 youth nationwide.

The following two articles highlight a Mott-supported adolescent pregnancy prevention initiative of the New York City-based Children's Aid Society, known as the Carrera model, which is both comprehensive and long-term for adolescents with many deficits in their lives. The final article looks at some Mott-supported projects that deal with other aspects of the teen pregnancy issue.



a Program for Youth 'at Promise,' Not 'at Risk'

BY SHEILA BEACHUM-BILBY

ess than two miles from the heart of a newly gleaming downtown in Indianapolis, sprightly, life-sized figures skip across a concrete wall in a 2,100-square-foot mural of neon colors.

It is an unexpected pleasure — a palette of oranges, reds, blues, greens and yellows dabbed on a wall near a railroad viaduct — for motorists on nearby Interstate 70 when they bypass this gritty, impoverished neighborhood on the city's southwest side.

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The mural stands as a visible reminder of an effort under way to help disadvantaged youth step into more promising futures by delaying early pregnancy and working toward accomplishments in arenas where they never before had experienced much success.

Most of the youth who helped paint this community mural in 1994 are part of an innovative adolescent pregnancy prevention program, dubbed Now for the Future by its chief sponsor, Planned Parenthood of Central and Southern Indiana Inc.

Indianapolis is one of four national sites that have replicated the promising Carrera-Dempsey adolescent pregnancy prevention program (more often referred to as the Carrera model) with the help of a three-year, $225,000 grant from the Mott Foundation. In addition, six other cities across the country are now implementing the model using a more stringent evaluation component with the help of a three-year, $1,418,278 Mott grant to the Children's Aid Society (CAS) of New York City.

"The greatest tool you have in the practice of the model is caring. If it is done right, it is [like] Miracle-Gro," said Michael A. Carrera, director of the National Adolescent Sexuality and Pregnancy Prevention Training Center for CAS.

"Many young people may not remember what you said or what you did with them, but they'll always remember how you made them feel."

There are seven major components in the holistic, long-term adolescent pregnancy prevention model created by Carrera in collaboration with Patricia Dempsey, a social worker and training director for CAS's national replication initiative.

The model offers participants help in: (1) finding jobs, (2) medical services, (3) mental health services, (4) family life and sex education, (5) academic assistance and guaranteed college admission, (6) creative self-expression, and (7) lifetime individual sports. It also encourages parents and other adults in the community to get involved, when possible, because it's often difficult to help adolescents make changes in their lives without family and community involvement.

Origins

The roots of the model stretch back to 1984, when CAS implemented a sexuality and pregnancy prevention program for high-risk adolescents in Harlem. A local funder, the Robin Hood Foundation, liked the model and decided to support replications throughout New York City.

By 1988, among the 175 young people and 75 parents who had been in the CAS program since 1985, there had been two pregnancies and one male who had caused a third pregnancy. In addition, all the teens were still in school, and three-quarters of them were at their regular grade level.

Based on the outcomes of the early model, the Mott Foundation made a four-year, $464,000 grant to support CAS in replicating and evaluating the model from 1992 through 1995 at four national sites — Indianapolis plus Akron, Ohio; New Orleans; and New York City. (The six new replication and evaluation sites are in Baltimore; Houston; Portland, Oregon; Rochester, New York; Seattle; and West Hollywood, Florida.)

Carrera rejects conventional approaches to adolescent pregnancy prevention, which he says usually deliver "Band-Aid-type" solutions to a national problem that needs triage.

There is a small, but growing, consensus that just providing young people with the facts on sexuality is not going to prevent many adolescent pregnancies. Carrera believes, instead, that support and counseling, offered regularly and consistently throughout the often turbulent teenage years, can help young people see that there are choices in life other than early parenthood, dropping out of school, abusing substances or getting involved in gangs and violence.

"It is my belief that unorthodox and daring prevention interventions are essential because orthodox approaches have clearly failed," writes Carrera in the preface to his 1996 book, *Lessons for Lifeguards: Working With Teens When the Topic Is Hope*.

"Our best thinking and our best efforts have gotten us where we are today. In that light, we can be sure that without changing, no change will occur."

For Carrera, the caring part is the soul of the program. Young people must get the message that it doesn't matter what they thought, said or did, but that they are safe.

Now for the Future participants take pride in their accomplishments.

"That this time," Carrera writes, "is the time that things will change and be different."

Carrera stretches his philosophy of caring way past what has been traditional and comfortable for most youth workers. To implement the model successfully, he encourages the use of what he calls the "parallel family systems" approach.

This approach simply means that youth workers should treat young people as if they were members of their own families. It would require youth workers, Carrera writes in his book, "to ask the following in every situation: 'If this were my son or daughter, what would I want to happen? What would I want this young person to know, to do, to believe or to feel?'"

Carrera insists that the family-systems approach is not just rhetoric, to be brushed aside when working with adolescents gets tough.

"It's fundamental to the operation of this program," he writes.

Companion to caring is the language youth workers employ when working with young people. Carrera rejects the much overused notion of adolescents being "at-risk," usually meaning that they are at a disadvantage because of socioeconomic or other factors. In the world of Carrera, that way of looking at the potential of adolescents is turned on its head.

"We believe that all young people are 'at-promise'; that they're capable of great things; that they have gifts and talents, and our job is to try to identify them," Carrera writes.

The sum of Carrera's above-the-waist approach to pregnancy prevention is: Give adolescents reproductive health information. But more importantly, help them get hooked into activities that make them feel good about themselves.

"We're a program that helps inspire in young people the desire to do well."

He cautions that it will take weeks, months, even years before the desired outcome with adolescents and their families occurs. It doesn't make sense, he says, that workers can help adolescents and their families change their lives in just six months or a year.

"Self-esteem can't be taught; it's caught," Carrera writes. "We're the carriers of it. They catch it from us. We're the agents."

the Model in Practice

Shaking up the usual way of doing business is a welcome concept to Kathleen Baldwin, Planned Parenthood's director of education and training in Indianapolis.

She arrives at the Concord Center, a community center that is home to Now for the Future and that sits just blocks from the wall mural, on an August morning that promises to turn into a sweltering afternoon.

She picks her way through half a dozen young children who clutch chunks of chalk, earnestly working on pastel creations that have sprouted on the wide sidewalk leading up to the center's back doors.

"This model is so much more about 'Here's what you can do' and not 'Here's what we don't want you to do,'" Baldwin said. "It really is about those positive alternatives and options for the future."

Just inside the doors, more young children in the center's day-care program labor on artwork at three long tables. All of the children are supervised by paid staff — adult workers employed by the center and several teenagers who are Now for the Future participants and receive hourly wages for learning job skills.

Kathleen Baldwin

"We're learning to take responsibility for other children," said 13-year-old Leslie Wafford, one of 32 program participants, most of whom

range in age from 10 to 14. The oldest teen participant is 18.

Leslie and her pal Linda Truth, 14, both are in the eighth grade and are marking their third year in the adolescent pregnancy prevention program. They spent 10 hours a week working in Concord Center's day-care in the summer of 1997, earning money they planned to use to buy clothes for school.

Leslie Wafford

Carrera's philosophy had resonated at the Planned Parenthood offices when the program was first being talked about in early 1991.

"We knew Indianapolis needed an effective adolescent pregnancy prevention program, and we knew we wanted to use the Carrera model because we were convinced that it worked," Baldwin recalled.

Planned Parenthood, in conjunction with a steering committee of local community leaders, then launched a feasibility study to explore the possibility of replicating the Carrera model in Indianapolis.

After months of study, Carrera was invited to Indianapolis to train about 50 practitioners and executive directors from local agencies and community centers that work with adolescents. He returned a second time to do an in-service training exclusively for the Planned Parenthood staff and its board of directors.

By the fall of 1993, Planned Parenthood and its partners were ready to open shop at the Concord Center, one of 14 multi-service community centers in the city. Just weeks before, the Planned Parenthood board had made a formal commitment to keep the program running for at least five to eight years.

It already had been determined by sifting through data from the local community service council and the 1990 U.S. Census that the Concord Center was located in one of three neighborhoods that had recorded the highest rates of teenage pregnancies in the city.

Planned Parenthood also knew from family planning providers and health clinics that serve teens in the neighborhood that sexually active teens there either didn't use contraceptives or used them rarely.

Other considerations in selecting a site were racial makeup and socioeconomic status of the target client population. The clients served at the center are 60 percent white and 40 percent African American. And citywide, 90 percent of all residents who use community centers live in households below the poverty level.

Baldwin says what cinched the decision to use the Concord Center was that staff members were eager to see the model implemented there.

"The hole here at the Concord Center was structured programming for adolescents," she said.

Linda Truth

The program is open to adolescents ages 10 to 17, but the priority was on getting 10- to 14-year-olds, because studies have indicated the best time for intervention is early adolescence.

Adolescents, parents and other concerned adults were recruited into the program through the use of open houses and the work of two community organizers, both youth workers at the center who know the neighborhood and the people who live there.

Baldwin and Karla Taylor-Temple, Now for the Future's program coordinator, recall the first year of the

"This holistic approach says you can't work with kids and isolate their problems and not incorporate family dynamics and not involve the family — either the traditional family or individuals that mean a lot to them."

Karla Taylor-Temple (right)

program as being challenging because of racial separation and infighting among groups of both adolescents and parents.

Slowly, however, they were able to come to an understanding. As the issue of race that had once separated them faded into the background, the adolescents and their parents started building friendships.

"They're forming sort of an additional safety net for each other," Baldwin said. "Part of that is the program is able to do that, but the parents are coming up and doing it for each other, too."

She recalls a house fire that left one family homeless. She was pleasantly surprised to learn that a family of another race took them in and gave them shelter.

That first fall, the program started with 20 adolescents. Baldwin says about a dozen of that original group still are participating four years later. With 32 enrolled by the summer of 1997, the program had a waiting list of 12 and expected to take in five more adolescents in the fall.

It is not hard to see why young people and adults alike find it easy to talk to Taylor-Temple, a psychotherapist who has worked with teenagers for 27 years.

She seems to easily juggle the many tasks that clamor for her attention, but seems never to forget why she's working with young people, or why this model and its philosophy make so much sense.

"This holistic approach says you can't work with kids and isolate their problems and not incorporate family dynamics and not involve the family — either the traditional family or individuals that mean a lot to them," Taylor-Temple said.

"You can't work in isolation of their culture or their neighborhood or their diverse backgrounds. And you also

have to reach the kids where they are, not where you want them to be."

Reba Lee, a 42-year-old divorced, single parent who works as a medical technician drawing blood at a local hospital, ranks the Concord Center and Now for the Future right up there with her own mother as strong supports and influences in helping raise her three sons.

"Concord is our second home. It's like part of my backbone," she said, searching for a metaphor that adequately conveys the help and support she has received over the past few years.

The smile on her face is wide when she shares that her oldest son Michael, 18, is the first teenager in the program to graduate from high school. He began attending college in the fall of 1997 with help from the Now for the Future scholarship fund.

Lee pulls out colored snapshots of her son's spring graduation from high school. Michael, dressed in his graduation gown, is posing and clowning with his brothers. Christopher, 16, is in Now for the Future. Eight-year-old Devon is too young, but Lee wants him to participate also when he gets old enough.

She said her sons already were involved in basketball at the Concord Center when she heard about Now for the Future. She signed them up and got hooked herself. She regularly attends the monthly parent meetings, in which various topics are discussed such as how to help children with their homework or how to talk to adolescents about sexuality.

Her sons devoted about eight hours a week to the program and learned practical life skills such as how to make a household budget; received weekly tutoring sessions to help keep their school grades up; and attended Job Club, the employment component, where they learned about the world of work and were required to open bank accounts.

Evaluation

So far, there have been no pregnancies among the girls participating in Now for the Future, and no boy has gotten a girl pregnant.

"We do closely monitor whether they're having intercourse and whether it's protected," Baldwin said. "I do feel like we know about that, too. Our sense is that among the handful who are having intercourse, they're using condoms fairly consistently."

Reba Lee

Indianapolis, like the other three original, Mott-funded, national replication sites, has used comparison groups as part of its program evaluation, a process not nearly as rigorous as the randomly selected control group method that is being used for the six newest replication sites. (See related article, page 18.)

In Indianapolis, Planned Parenthood has been able to collect data from a comparison group in 1995 and 1996, though Baldwin said they were finding it difficult in 1997 to track down the participants in the comparison group.

Unlike the newest sites, with their random selection of participants, Now for the Future admitted adolescents into the program on a first-come, first-served basis with an eye toward balancing the number of males and females.

Not so for a second Indianapolis site, which strictly targets African-American males. The Brotherhood Program, which started in 1992, became a Carrera replication site in the fall of 1997 after additional tutoring and counseling services were added.

Baldwin said the Brotherhood Program will work with 25 African-American males ages 12 to 15 three nights a week, offering them positive adult role models in much the same format as Now for the Future. This program has the support of the Indianapolis-based Lilly Endowment, which has maintained extended funding to Now for the Future as well.

The Ties That Bind

For Baldwin, the key remains staying abreast of how the adolescent participants are doing academically. Their success or failure in school is a barometer, of sorts, that helps predict fair weather or foul ahead for them.

"I really see [adolescents] having trouble with school as kind of the beginning of the end," she said. "So not only grades and discipline marks, but attendance and tardiness and all of that stuff we stay on like crazy, and we're seeing some real progress."

Each participant undergoes academic testing and assessments before an individual education plan is drafted. And every adolescent in the program has a volunteer tutor whom they work with weekly during the school year.

Jonathon Leath

The ties that bind the program participants together aren't merely anecdotal. The program's evaluator has noted that Indianapolis has the best retention rate of any of the four original sites.

For adolescents in the program over the long haul, the push and pull of competing outside interests often means learning how to manage a delicate balancing act.

"As the kids get older, we've struggled with keeping them engaged when they're involved with what we consider to be very positive alternative activities like school sports, or plays at school, or they're working after school at a real job," Baldwin said.

At the beginning of the fall semester, each participant contracts for an individual schedule to attend program classes on sex education, Job Club, life skills, recreation and creative expression.

Adolescents who attend Job Club regularly receive $16 every two weeks. During the summers, participants have the opportunity to work at jobs that pay younger adolescents $4 an hour and older teens the minimum wage.

Lonnie Tite

"The kids say one of the things they like best about the program is the paycheck," Baldwin said. "Not a surprise. And that's fine. We get what we want out of it: They come; they stay involved."

Bolstering Confidence

The only goal 15-year-old Jonathon Leath has one August afternoon is keeping a close eye on about 20 young children with roller skates tied on their feet. Jonathon is a day-care worker with Now for the Future, which he has been attending for more than a year.

The doors are thrown wide open at the roller-skating rink in Indianapolis to catch stray breezes as some two dozen youngsters line up single file and attempt to pass safely under the limbo pole in the middle of the rink floor. Jonathon, a 10th-grader this year, has touched the pole and sits on the sidelines, with a cluster of small children around him.

Jonathon is not the only member of his family involved in Now for the Future. His parents both attend the monthly parents' meeting, and his 11-year-old brother, William, is in the program, too.

With plans of going to college and aspirations of becoming a cartoonist, Jonathon can attest to the benefits of the program after just one year. His volunteer tutor with the program worked with him last school year and helped him pull his C in English up to an A.

Jonathon's friend, Lonnie Tite, a 14-year-old ninth-grader, can tell much the same story. He said his volunteer tutor helped him make the honor roll, moving up from D's in school to A's.

"He kept me going," said Lonnie, who plans to attend college and wants to produce songs. "If I wasn't (in the program), then I'd probably be wasting my time."

Jonathon and Lonnie have a desire to do well, which Carrera says is critical to inspire if workers are to be successful in working with adolescents.

— — —

That desire to do well — and to take pride in accomplishments — is perhaps symbolized best by the wall mural, which has been marred by graffiti only once since it was painted three years ago.

Two artists had helped the adolescents trace the outlines of their bodies on the wall in an array of poses that strikes a fanciful note.

One is caught hopscotching, two are hanging off the wall, one has no head and just the bottom of his body is outlined, another flashes twin peace signs. Each stands out in his or her own unique way.

But they all share something in common: They all have smiles on their faces.

raining and evaluation are major topics for the six cities - Baltimore; Houston; Portland, Oregon; Rochester, New York; Seattle; and West Hollywood, Florida — that are home to the newest replication/evaluation sites for the Carrera model.

The Children's Aid Society (CAS) has a three-year, $1,418,278 grant from the Mott Foundation to provide technical assistance and evaluation support for replicating the model at these six sites. Unlike earlier sites, they will conduct a rigorous evaluation to help move the model forward by using randomly assigned control groups and stringent data collection to show that the program works.

During a five-day training seminar conducted in July 1997, the representatives were led by Michael A. Carrera at CAS's offices in New York City. They were there to learn every detail about the model's organizing principles, its components and staffing requirements, and how to recruit participants and raise funds for implementation.

At the seminar, Carrera's energy and experience, earned working as an educator with young people and their families for almost 40 years, is on full display. His enthusiasm is infectious; his commitment sincere.

He works a group of 25 agency practitioners, community organizers and administrators the way a preacher might work his congregation.

His voice booms out with conviction, and his energy is kinetic. He paces the floor. He gets down on one knee and then bounces back up to prowl again. He gestures. He rolls up his shirt sleeves, ready to tackle the task at hand. He asks his audience to stay with him. They do.

"This is a very spiritual approach, this program. It's about the goodness of young people, the worthiness of young people, the possibilities of young people. That's very spiritual," Carrera tells the training participants, who are comprised of agency staff members.

The participants all face different challenges in implementing the program at their sites, but they are of like minds in their faith that the Carrera model works.

"It's a way of life — the philosophy. I would always do it this way. It makes 100 percent common, ordinary sense," said Dena Green, the administrator for the Baltimore City Health Department's Healthy Teens & Young Adults program.

Each of the replication sites has had to find its own mix of local partners and funders to provide the comprehensive, long-term services to adolescents and parents that the Carrera model requires.

Baltimore is the only one of the six new sites that has as partners in implementing the model the city health department and a local foundation, the Aaron Straus and Lillie Straus Foundation, which has committed to funding the Baltimore site for three years.

With adolescent pregnancy rates soaring and limited opportunities to do primary prevention, it seemed the perfect timing for Straus, which has had a longtime interest in reproductive health issues, to team up with the city health department in getting the model implemented in Baltimore.

And the city already had a running start because Green had been trained in the model in 1991 and had been doing it in a limited way in her job at the city health department.

About 1,200 miles down the eastern seaboard from Baltimore, some educators for the Planned Parenthood of South Palm Beach and Broward

Keys to Future for Carrera Model

Counties and local funders in West Hollywood had decided more than two years ago to look at adolescent pregnancy prevention programs around the country.

"We were really looking for what works," said Marilyn Bonilla Krantz, chief executive officer of Planned Parenthood of South Palm Beach and Broward Counties, which are home to many impoverished neighborhoods.

Different programs in the community addressed different aspects of the adolescent pregnancy problem, but nothing was comprehensive. So when the Carrera model kept popping up again and again as a program that works, the local Florida community decided it was a good fit and sought to become a replication site.

A common thread weaves itself through conversations with those who have been using the Carrera model for several years and those just beginning to put it into practice: They typically like best its holistic and long-term approach to adolescent pregnancy prevention.

As part of the effort to advance the model, each of the newest sites will be required to randomly select 50 adolescents for services and use a control group of 50 adolescents who don't receive the services to determine the effectiveness of the program. Participants in the control group won't be denied services; they just will receive other types of services as a means of measuring the model's effectiveness.

With a sample of 300 adolescents aged 13 to 15 and random selection of participants, the evaluators will be able to pinpoint with scientific accuracy which elements of the program work because they have had some impact on participants' behaviors, not just knowledge. Data collection will take place over three years, with evaluators hoping to have information to report by late 1999.

Dr. Susan Philliber of New York-based Philliber Research Associates is overseeing the evaluation and random assignment at the six new replication sites. While the randomly selected group will get the full Carrera model, the control group of participants will have access to the standard services available at the individual sites before the model was introduced. Those services might include, for example, access to a gymnasium, recreation room or computer room.

Experts agree that the credibility that prevention programs can gain with stringent evaluations becomes increasingly important as resources shrink.

Address Sociocultural Barriers

BY SHEILA BEACHUM-BILBY

RONX, N.Y. — Their stage is the front of a school classroom, their only props a desk and a telephone. But the teen advocates for the Planned Parenthood of New York City's (PPNYC) Bronx Teen Initiative have the audience at a junior high school in the South Bronx eating out of their hands.

In a fast-moving, 10-minute skit, the audience is introduced to Hennesy, a teenager who confides to her friend, Kenya, that she met 30-year-old Omar and, flattered by his attention, had sex with him even though she has a boyfriend, Kevin. Hennesy is subsequently crushed to learn that Omar is the father of a child and not the person she thought he was.

The youngsters sit transfixed as the drama unfolds. Not even the loud humming of a window air conditioner, which keeps the room cool on a sweltering July afternoon, distracts them.

At the skit's conclusion, Pierce Mills, a PPNYC senior sexuality educator and trainer, helps the audience think through some possible consequences of a teen girl dating an older man. He invites them to ask questions of the peer educators, who stay in their character roles when answering.

"What drew Hennesy to Omar in the first place?" Mills asks.

"His looks," says Ellis Olive, 13, an eighth-grader.

"He's 30," chimes in 12-year-old Offney Gallimore, who is in the seventh grade.

In questioning the skit's characters, Ellis asks Omar why he treated the mother of his child so coldly by leaving her and the baby.

Omar retorts: "You think I have some responsibility?"

"Yes," the audience of adolescents responds loudly in unison.

Offney challenges Kevin, Hennesy's boyfriend: "If she has a baby, you gonna take responsibility?"

"That's not gonna happen," says Kevin, dodging the question.

This exchange provides a convenient opening for Mills to step in with some basic information about available birth control methods.

And before the skit even started the teen advocates gave their peers information about PPNYC clinics. Care to people younger than 21 is free with proof of age. And it's all confidential.

The teen advocates were trained under the auspices of PPNYC's Adolescent Research Initiative (ARI), an innovative project funded in part by a two-year, $400,000 grant from the Mott Foundation. The project seeks to identify sociocultural barriers to adolescent reproductive health care.

If the cultural barriers to services can be identified, it is easier to figure out how they can be knocked down to open the door for more low-income and minority teens to feel comfortable about seeking and obtaining reproductive health services.

In addition to ARI, the Mott Foundation has made a three-year, $424,122 grant to Child Trends Inc. of Washington, D.C., which has launched a national research initiative looking at barriers to reproductive health services

Audience members are transfixed by the Bronx Teen Initiative skit.

for minority youth, and a two-year, $100,000 grant to the Sexuality Information and Education Council of the United States Inc. (SIECUS) of New York City for its Minority Outreach Initiative, a comprehensive sexuality education project targeting African-American and Latino communities.

Statistics compiled by SIECUS tell why it is so important to identify cultural barriers to services. Consider:

- The Alan Guttmacher Institute of New York City reports that half of all teen females aged 15 to 19 have had intercourse (African American, 61 percent; Hispanic, 49 percent; white, 52 percent), regardless of race, income, religion or location. However, African Americans are more likely than their white peers to be sexually active at a young age. Half of all African American males report having had sexual intercourse by age 15.
- Minority youth are less likely than their white peers to use contraceptives. Thus, their pregnancy rates are twice as high.
- Low-income teenagers (71 percent) are less likely than their higher-income peers (83 percent) to use contraceptives.
- In 1990, the birthrates for teens aged 15 to 17 was 84 per 1,000 for African Americans, 65 per 1,000 for Hispanics and 23 per 1,000 for whites.

Faced with such sobering statistics, there are a number of efforts under way nationally to help batter down the sociocultural barriers to adolescent reproductive health services.

The PPNYC initiative was launched when it became obvious that teenagers weren't returning to clinics for services, said Patrice Armstrong-Leach, ARI deputy director.

"The teen pregnancy rates were up here (in New York City), while the national rates were dropping," she said. "There was a whole community of young people who weren't being served."

To help understand the causes, PPNYC proposed a multipronged effort involving analyzing data as well as working with teenagers and community groups in what is known as a community engagement process.

The community engagement process, created by the Cornerstone Consulting Group Inc. of Houston and Philliber Research Associates of New York City, involves defining and assembling the community, defining what the community needs

to know, community mapping, data collection, and reviewing and disseminating results.

An analysis was made of 75,000 visits to PPNYC clinics between 1993 and 1996 by women who were 20 years old and younger at the time of their first visit. PPNYC looked at their clients' characteristics, such as gender, age and ethnicity; the services they received; and their contraceptive and pregnancy histories.

From that data was culled a list of clients — called "non-continuers" — who visited a clinic once but did not return to PPNYC within 18 months after that first visit. About 100 of them were interviewed to obtain information on their experiences visiting a clinic and why they did not return, what factors would have encouraged them to return, and whether and how they were receiving reproductive health services elsewhere.

ARI staff also took its mission of looking at barriers to service for adolescents into neighborhoods. It identified four communities — each a distinct, culturally bound geographic area — that had high rates of teen pregnancy and sexually transmitted diseases, were close to PPNY or another family planning provider, and had established community-based organizations that could be tapped for collaboration.

"A whole community of young people wasn't being served."

Patricia Armstrong-Leach

Advisory groups set up in each community used focus groups to help develop their own survey instruments. Teens in each of the communities were trained to use the surveys to interview 1,409 teenagers about their sexual activity.

The hope is that information from these surveys will shed more light about the barriers teens face in obtaining reproductive health care services.

So far, PPNYC has identified a number of barriers, including lack of knowledge about service availability, cost, clinic location, limited hours of service, confidentiality concerns, impersonal or insensitive staff, no follow-up procedures, and cultural or religious beliefs regarding the morality of seeking reproductive health care.

A sampling of the survey results to date: Some adolescents said they waited hours for service. One teen complained that the physician didn't talk to her at all. Another said her physician needed a translator in the examining room so he could communicate with her.

ARI also will recruit teenagers to call, visit and record their experiences in trying to access reproductive health services at 10 sites, three of which are PPNYC clinics and all of which provide youth-focused family planning services.

While PPNYC's project is culling from its database and also using expert research and evaluation, it is placing major emphasis on responding to local community and teen evaluations.

As part of its three-year study, Child Trends is using youth and community input, but it also is looking at several service providers to determine how reproductive health services can be made more appropriate — both developmentally and culturally — for adolescents seeking better access to such services.

Barbara Sugland, director for Child Trends' Reducing Barriers to Reproductive Health Services for Diverse Youth, said the initiative will

focus on "what do teens tell us, what are clinics doing ... and what kind of suggestions do we make to clinics that really want to help young people."

Project staff began asking 148 adolescents aged 15 to 17 in Baltimore and Houston about the barriers they see to accessing reproductive health services and how they think services can be improved. The teens in Baltimore were African American and white; the teens in Houston were Hispanic.

The project then moved to service providers, with four reproductive health service agencies selected in each of the two cities. The objective is to assess how well they understand and respond to the developmental and cultural needs of adolescents.

From the data collected, Child Trends plans to draft guidelines for ways to implement a "more developmentally and culturally competent reproductive health-care delivery system."

Building on the efforts supported initially by the Carnegie Corporation of New York, SIECUS is expanding its Minority Outreach Initiative to increase and support sexuality education for minority and low-income communities and youth.

It is working with a number of national organizations that serve low-income and minority communities, including the National Council of La Raza, the National Indian Education Association and the Congress of National Black Churches. Its goal is to help educate these groups about providing comprehensive sexuality education to youth of color and effective approaches to pregnancy prevention.

SIECUS also is planning regional symposia that will target key groups serving minority communities. The objective is to help them assume larger roles in providing and promoting sexuality education, including how to address the specific needs of low-income and minority youth.

The council provides technical assistance on how to shore up and support minority communities that find themselves embattled against naysayers in their efforts to promote sexuality education. It also plans to provide more of the resources it has developed to communities it is helping with technical assistance and to national, state and local groups for use at their conferences.

It is such barriers to services for some adolescents that the teen advocates for PPNYC's Bronx initiative can tackle in a nonthreatening way when they perform skits for their peers.

Yesenia Ramierez, one of seven teen advocates hired and trained by Mills in an eight-week session in the spring of 1997, says she got involved as a peer educator to help her people.

"If we can help to at least control pregnancies and sexually transmitted diseases, they'll grow up safer," said Ramierez, a 19-year-old freshman studying computer operations at the Bureau of Manhattan Community College.

The advocates came up with the scenarios — situations that teens actually might encounter — and wrote the dialogue for four skits dealing with adolescent pregnancy prevention.

"It's easier coming from someone you know," teen advocate Barbara Medina, a 17-year-old senior at South Bronx High School, says of the information they are attempting to give their peers through the skits.

As part of their training, the teen advocates were asked to express in writing their hopes and fears as they undertook the work of becoming peer educators.

One teen wrote in the hope column: "I hope to make a bigger impact on my dying community."

In the fear column, another wrote: "I fear people don't use the information."

Besides these programs that address sociocultural barriers, the Mott Foundation has made grants to address a number of other troubling issues as well.

Historically, teen pregnancy prevention has been viewed as a gender-specific issue, with a disproportionate focus on programs

that targeted young women. In the past decade or so, however, the field recognized that half of the equation was missing in many approaches, and male involvement was addressed more clearly in many programs.

Recent findings have shown that males involved with teenage pregnancy often were not teenagers themselves. Several studies, including one published by the Alan Guttmacher Institute in 1995, found that up to half of the fathers of babies born to girls aged 15-17 were 20 years of age or older, and only 35 percent of the fathers of babies born to girls aged 15-19 were also under age 20.

Further complicating the perceptions about teen pregnancy have been a number of reports in recent years about the high rate of prior sexual abuse found among teen mothers.

Clearly, sexual exploitation of adolescent girls and child sexual abuse are serious issues, but there is not enough information yet to understand how much either of these issues is responsible for the high numbers of teenage pregnancies in this country.

Recognizing this situation, the Foundation funded three projects in 1997 that address these issues:

- The Alan Guttmacher Institute, with the help of a one-year, $207,993 Mott grant, is studying the dynamics of relationships between adolescent girls and young men (often 18 to 21), including contraceptive negotiation and other relevant power dynamics. Results will increase understanding about the degree of exploitation, potential for increased enforcement as a deterrent, and possibilities for prevention programs to reach both the females and males in these relationships.
- The Urban Institute of Washington, D.C., which received a two-year, $225,000 Mott grant, will study what prevention messages are most likely to reach the young men (early 20s) who are responsible for so many of the births to teenagers.
- The Ounce of Prevention Fund of Chicago received a three-year, $450,000 Mott grant to develop a curriculum and training program that will address the links between sexual abuse and the early onset of sexual activity to adolescent pregnancy. The program will examine the appropriate stage at which adolescent participants should receive specific information, with an emphasis on reducing the risk factors related to the possible link between sexual abuse and teen pregnancy.

Here are brief descriptions of some other recent grants made by Mott in the field:

- Alan Guttmacher Institute, 18 months, $75,000. To support an effort to effect change in the area of teenage pregnancy and its relationship to welfare reform and to spur realistic and responsible action at the state and federal levels.
- Child Trends, three years, $149,986. To support the publication and distribution of "Facts at a Glance," a six-page summary of current national, state and large city-level statistics on teenage pregnancy in the United States.
- Child Trends, one year, $56,021. To support analysis of state-level variations in teen pregnancy and childbearing to better understand some of the factors that contributed to a drop in teen birthrates in 46 states between 1991 and 1994.

Foundation Staff Expands

The Mott Foundation has added five staff members, including two in Programs, two in Communications and one in Administration/Accounting.

Programs

Ronald M. White has joined the Poverty program as a Program Officer in the program area of Building Communities. As such, he is working in the objectives of community organizing and development, and community leadership development.

Prior to joining Mott, White was director of grantmaking at Share Our Strength in Washington, D.C., a public charity with a $10-million annual grantmaking budget.

Ronald M. White

He is currently co-chair of the board of directors of the National Network of Grantmakers, an affinity group of the Council on Foundations.

White holds a bachelor's degree in philosophy from Dominican College in Racine, Wisconsin, and a master's degree in history and philosophy of religions from Miami University in Oxford, Ohio. He also has taken graduate studies in information sciences and administrative leadership from the University of Wisconsin-Milwaukee.

White's other employment experience includes working for the Campaign for Human Development, where he was program officer and director of justice education; the U.S. Catholic Conference, where he was public policy analyst for health and welfare; and the Archdiocese of Milwaukee.

Lenka Setek-Synacova is a new Program Assistant for the Civil Society program's regional office in Prague, Czech Republic.

She had been the grants officer at the British Embassy in Prague for the Know How Fund, which is the British government's program of bilateral assistance for countries in Central and Eastern Europe.

Setek-Synacova, who has dual Czech and United Kingdom citizenship, attended the School of Slavonic and East European Studies at University of London in England and the Masaryk University in Brno, Czech Republic. Her degree is in contemporary East European studies.

In addition, two associate program officers have taken on new responsibilities.

Lori Villarosa, who has managed the teenage pregnancy prevention grantmaking under the Poverty program since 1994, is now in charge of race relations grantmaking for the United States program area of the Civil Society program.

Benita Melton will now oversee the teenage pregnancy prevention grantmaking, in addition to her work in violence prevention, for the Poverty program.

Communications

Journalists **William W. Hanson** and **Sandra D. Davis** have joined the Foundation as Communications Officers.

William W. Hanson

Hanson most recently worked for the *Detroit Sunday Journal* newspaper. His Mott assignment is working primarily with the Civil Society program team on publication and dissemination issues.

Hanson holds a bachelor's degree in

liberal arts and communication from the University of Michigan in Ann Arbor.

His other employment experience includes reporting and editing work for the *Detroit Free Press* and the *Ann Arbor News*. He also has studied and worked in London, England.

Sandra D. Davis

Davis is responsible for the development and marketing of the Foundation's Web site (www.mott.org).

She most recently was editor of the on-line *Detroit Sunday Journal* and also was a Web consultant for the United Auto Workers union in Detroit.

Davis holds an associate degree in liberal arts from Hilsborough Community College in Tampa, Florida, and a bachelor's degree in journalism from Florida A&M University in Tallahassee.

Her past journalism experience includes reporting posts for the *Tampa* (Fla.) *Times*, the *Tampa Tribune*, the *Charlotte* (N.C.) *Observer*, the *Providence* (R.I.) *Journal* and the *Detroit Free Press*. She also has been an independent writer, editor and designer.

Administration/ Accounting

Stephanie A. Duncan has joined the Foundation as an Accounting Assistant. She is working on building accounting matters, as well as providing assistance with other special projects in both the Mott Foundation Building office and the Foundation's accounting areas.

Duncan holds a bachelor's degree in business administration/ accounting from the University of Michigan-Flint. She comes to the Foundation with five years of accounting-related experience.

Environment

Project to Protect Ontario Wilderness

Ontario, which contains more than 30 percent of the land in the Great Lakes basin, has no formal, legal protection for endangered species. Thus, designated wilderness areas are virtually the only source of protection for biological diversity.

FEDERATION OF **Ontario Naturalists**
Ontario's voice for nature since 1931

In coordination with World Wildlife Fund Canada and the Wildlands League, the Federation of Ontario Naturalists will participate in Ontario's "Lands for Life" land-use planning process. Through this, more than 45 percent of the public land in the province will be designated for timber extraction, remote tourism or wilderness preservation.

The coalition will seek to ensure that this process produces an ecologically representative, protected areas system; an adequate land base for remote tourism activities; and a network of roadless wilderness areas.

The Federation of Ontario Naturalists has received a two-year, $250,000 grant from the Mott Foundation to participate in this project. The federation, founded in 1931, has 15,000 members and operates Ontario's largest private nature reserve system.

For further information, contact John Riley, acting executive director, Federation of Ontario Naturalists, 355 Lesmill Road, Don Mills, ON M3B 2W8, Canada.

California Group Backs Sustainable Agriculture

The California Sustainable Agriculture Working Group was established in 1994 to promote pesticide-use reduction, sustainable agricultural systems and community food security.

For three years, it has been building bridges between rural and urban constituencies on these issues. Among its accomplishments to date are leveraging public and private funds for sustainable agriculture programs, maintaining support for university research programs, training communities to establish local food policy councils, and involving local organizations in national policy debates.

To help continue this work, the Mott Foundation has made a three-year, $60,000 grant to the Community Alliance with Family Farmers Foundation for support of the working group. This is a renewal of a two-year, $40,000 grant made in 1995.

Community Alliance with Family Farmers

During the next three years, the coalition of more than 35 members, representing environmental, consumer and labor interests, will continue to educate its members about state and national policy initiatives, coordinate California's participation in the National Campaign for Sustainable Agriculture and other national networks, and provide leadership development and networking opportunities for its members.

For further information, contact Kai Siedenburg, Community Alliance with Family Farmers Foundation, P.O. Box 363, Davis, CA 95617.

Environmental Justice Focus of Detroiters

More than half of Michigan's hazardous waste sites are found in Detroit, where one-third of the population lives below the poverty level and nearly 80 percent are racial or ethnic minorities. Exposure to toxic contaminants, such as those found in hazardous waste facilities, has caused serious public health problems, especially in children and other vulnerable populations.

Detroiters Working for Environmental Justice (DWEJ), established in 1994, is the only organization dedicated exclusively to resolving the city's environmental justice problems. Since its establishment, the group has developed a strong base of support among community activists, business representatives and political leaders.

With the help of a two-year, $50,000 Mott Foundation grant, DWEJ will work to strengthen its relationships with various community interests, continue to educate the public about environmental justice issues and work with community leaders to find collaborative solutions for the environmental problems facing Detroit. The group also will network with other Mott-funded organizations in Great Lakes cities.

For further information, contact Donelle Wilkins, executive director, Detroiters Working for Environmental Justice, 12101 Mack Service Drive, Detroit, MI 48215.

Flint

Lectures to Focus on Race Relations

Citizens talking and listening to one another can create the breeding ground for empathy and mutual understanding and lead to collective problem-solving on important issues.

In the Flint area, where surveys have found satisfaction with race relations declining over the past decade, it is particularly important to begin a conversation that will move the community toward corrective action on this topic.

To begin the process of effective dialogue, the Flint Public Library will host a series of communitywide lectures and discussions on racism and race relations.

With the help of a two-year, $103,830 grant from the Mott Foundation, the lecture series will feature six to eight authors representing different perspectives on

race relations. The lectures and follow-up discussions will be taped and made available through the library, as will copies of each author's relevant works. Annotated reading lists also will be distributed throughout the county's libraries and schools.

If successful, the forum approach may serve as a model for addressing other community concerns and issues in Flint.

For further information, contact Gloria Coles, director of library services, Flint Community Schools, 923 E. Kearsley St., Flint, MI 48503.

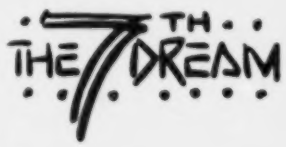
Production Highlights Violence for Teenagers

Not all teenagers experience violence directly in their lives, but it is undeniable that Americans are living in an increasingly violent society.

The Flint Youth Theatre chose to address the problem of violence through the power of creative writing and live theater. This resulted in "The 7th Dream," a live, multimedia theater production based on the writings of hundreds of Flint-area ninth-grade students. The production chronicles youth telling others about the violence they see, feel and experience in their daily lives.

The initial response to this production was so strong that the production has been remounted for a series of performances in selected cities across the country with the help of a two-year, $163,302 grant from the Mott Foundation.

In addition, the grant money will be used to produce a video for distribution to schools and social agencies interested in replicating the program; to link local anti-violence efforts with local and national programs using the visual and performing arts to deal with youth-related issues; to assist area teachers and students to explore ways to use the arts as a catalyst for dealing with important community issues; and to train young people as mentors or peer educators in conflict resolution.



The Flint Youth Theatre, founded in 1957, is recognized as one of the top youth theater programs in the nation.

For further information, contact: Sue Wood, executive director, Flint Youth Theatre, 1220 E. Kearsley Street, Flint, MI 48503.

ott Exchange is the official magazine of the Charles Stewart Mott Foundation of Flint, Michigan. The Mott Foundation is a private, grantmaking foundation supporting programs across the United States and, on a limited geographic basis, internationally. Current interests are divided into four programs, which are subdivided into focused program areas:

Central/Eastern Europe, Russia and the Republics; South Africa; United States; Global Nonprofit Sector and Other

Prevention of Toxic Pollution, Protection of the Great Lakes Ecosystem, Reform of International Lending and Trade Policies, Special Initiatives

Developing Public Capital, Creating National Models, Building Legacy (These program areas are part of the framework for Flint Area grantmaking that was approved by Trustees in 1997 and is expected to be adopted formally in 1998.

Building Communities, Strengthening Families, Improving Education, Expanding Economic Opportunity, Cross-Cutting Initiatives

In addition, we maintain the flexibility to investigate new opportunities through an Exploratory and Special Projects program.

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